

SECTION 404 (2)
CMHSP DEMOGRAPHIC AND COST DATA
FY 2007

Introduction

MICHIGAN DEPARTMENT OF COMMUNITY HEALTH
REPORT ADDRESSING PA 330 (2004) SECTION 404(2) & 404(3)

Section 404(2)(a,b) requires a report containing information for each Community Mental Health Services Program (CMHSP) with a statewide summary; such a report will give a demographic description of service recipients, including reimbursement eligibility, client population groups, age, ethnicity, housing arrangements and diagnosis, and per capita expenditures per client population group. This information is provided in the attached document for persons with mental illness (MI), developmental disabilities (DD), dual diagnosis (MI & DD) and substance abuse for each CMHSP, as well as statewide.

Information to address these sections is current as of April 2007, from all 46 CMHSP programs for the reporting period October 1, 2006 through September 30, 2007. In FY 2007, there were 166,524 persons with MI, 27,448 persons with DD, 10,273 persons with MI & DD, 1,285 persons who received substance abuse services only, and 7,727 persons for whom diagnosis is unknown, for a total 213,257 persons who received services in CMHSPs throughout Michigan. Of those individuals with MI, 36,638 (22.0 percent) are 17 years or under and 5,315 (19.4 percent) of the persons with DD are 17 years or younger. Of those persons for whom race or ethnicity are reported, 62,277, (32.9 percent) are members of a minority group. The total costs reported across the 46 CMHSPs for FY 2006 was \$2,208,193,707. The attached material provides cost information by CMHSP for adults and children with MI, and persons with DD.

Section 404(2)(c) requires financial information that includes a description of funding authorized expenditures by client group and fund sources, and cost information by service category. Information to address this section was obtained in January 2008, from all 46 CMHSPs for the period October 1, 2006 through September 30, 2007. The attached report provides the costs and units for specific services for adults and children with MI, and persons with DD for each CMHSP, as well as statewide.

Section 404(2)(d) requires the reporting of data describing service outcomes which shall include, but not be limited to, an evaluation of consumer satisfaction, consumer choice, and quality of life concerns including, but not limited to, housing and employment. The Michigan Department of Community Health decided in 2006 to redesign its approach to the measurement of consumer satisfaction in a way that would better promote improvement at the program and agency levels. In 2007, all beneficiaries enrolled in Assertive Community Treatment (ACT) were asked to complete the 28-item MHSIP Consumer Survey. In addition, all families with a child or adolescent receiving home-based services were also asked to complete the 26-item Youth Satisfaction Survey (YSS) for Families. This information is provided in the attached for each CMHSP.

Section 404(2)(e,f) requires information about access to CMHSPs which shall include, but is not limited to, the number of persons receiving and/or requesting services, and the number of second opinions requested under the code and the determination of any appeals. This section provides information from numerous measures from the Performance Indicator System. Aggregated performance indicator data is submitted quarterly by CMHSPs. The figures in this section illustrate statewide performance over time by CMHSP on access and outcome indicators that MDCH believed could be affected by the implementation of managed care. This report contains data for the four quarters of data collected during fiscal year 2007.

Section 404(2)(g) requires an analysis of information provided by CMHSPs in response to the needs assessment requirements of the Mental Health Code, including information about the number of persons in the service delivery system who have requested, and are clinically appropriate, for different services. In the attached, there is material on the assessment of community needs for each CMHSP for identified subpopulations in need, as well as detailed summaries of the number of total persons in need by CMHSP. Also provided are detailed summaries by CMHSP on the bed capacities by setting, as well as waiting lists for specific non-emergent services for adults and children with MI and persons with DD.

Section 404(2)(h) requires lapses and carry forwards. This information is provided in the attached for each CMHSP.

Section 404(2)(i) requires information regarding provider contracts, including amount and rates, organized by type of service provided. Section I provides information on the number of contracts and contract amounts for specific services for adults and children with MI, as well as persons with DD. This information is provided for each CMHSP, as well as statewide.

Section 404(2)(j) requires information on community mental health services, including both expenditures by CMHSP organized by Medicaid eligibility group and performance indicator information that is required to be submitted to the Department. The expenditures by Medicaid eligibility group are provided in this section as are the Performance Indicator reporting requirements.

Section 404(3) requires that the Department shall include data reporting requirements listed in subsection (2) in the annual contract with each individual CMHSP. This information is included in the attached.